

### §3.310

is no record of such disease during service, provided further that the rebuttable presumption provisions of §3.307(d) are also satisfied.

Chloracne or other acneform disease consistent with chloracne  
Type 2 diabetes (also known as Type II diabetes mellitus or adult-onset diabetes)  
Hodgkin's disease  
Chronic lymphocytic leukemia  
Multiple myeloma  
Non-Hodgkin's lymphoma  
Acute and subacute peripheral neuropathy  
Porphyria cutanea tarda  
Prostate cancer  
Respiratory cancers (cancer of the lung, bronchus, larynx, or trachea)  
Soft-tissue sarcoma (other than osteosarcoma, chondrosarcoma, Kaposi's sarcoma, or mesothelioma)

NOTE 1: The term "soft-tissue sarcoma" includes the following:

Adult fibrosarcoma  
Dermatofibrosarcoma protuberans  
Malignant fibrous histiocytoma  
Liposarcoma  
Leiomyosarcoma  
Epithelioid leiomyosarcoma (malignant leiomyoblastoma)  
Rhabdomyosarcoma  
Ectomesenchymoma  
Angiosarcoma (hemangiosarcoma and lymphangiosarcoma)  
Proliferating angioendotheliomatosis (systemic)  
Malignant glomus tumor  
Malignant hemangiopericytoma  
Synovial sarcoma (malignant synovioma)  
Malignant giant cell tumor of tendon sheath  
Malignant schwannoma, including malignant schwannoma with rhabdomyoblastic differentiation (malignant Triton tumor), glandular and epithelioid malignant schwannomas  
Malignant mesenchymoma  
Malignant granular cell tumor  
Alveolar soft part sarcoma  
Epithelioid sarcoma  
Clear cell sarcoma of tendons and aponeuroses  
Extraskelatal Ewing's sarcoma  
Congenital and infantile fibrosarcoma  
Malignant ganglioneuroma

NOTE 2: For purposes of this section, the term *acute and subacute peripheral neuropathy* means transient peripheral neuropathy that appears within weeks or months of exposure

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to an herbicide agent and resolves within two years of the date of onset.

(Authority: 38 U.S.C. 501(a) and 1116)

[41 FR 55873, Dec. 23, 1976 and 47 FR 11656, Mar. 18, 1982, as amended at 47 FR 54436, Dec. 3, 1982; 49 FR 47003, Nov. 30, 1984; 53 FR 23236, June 21, 1988; 54 FR 26029, June 21, 1989; 57 FR 10426, Mar. 26, 1992; 58 FR 25564, Apr. 27, 1993; 58 FR 29109, May 19, 1993; 58 FR 41636, Aug. 5, 1993; 59 FR 5107, Feb. 3, 1994; 59 FR 25329, May 16, 1994; 59 FR 29724, June 9, 1994; 59 FR 35465, July 12, 1994; 60 FR 31252, June 14, 1995; 61 FR 57589, Nov. 7, 1996; 65 FR 43700, July 14, 2000; 66 FR 23168, May 8, 2001; 67 FR 3615, Jan. 25, 2002; 67 FR 67793, Nov. 7, 2002; 68 FR 42603, July 18, 2003; 68 FR 59542, Oct. 16, 2003; 69 FR 60089, Oct. 7, 2004]

### §3.310 Proximate results, secondary conditions.

(a) *General.* Except as provided in §3.300(c), disability which is proximately due to or the result of a service-connected disease or injury shall be service connected. When service connection is thus established for a secondary condition, the secondary condition shall be considered a part of the original condition.

(b) *Cardiovascular disease.* Ischemic heart disease or other cardiovascular disease developing in a veteran who has a service-connected amputation of one lower extremity at or above the knee or service-connected amputations of both lower extremities at or above the ankles, shall be held to be the proximate result of the service-connected amputation or amputations.

(Authority: 38 U.S.C. 501, 1110-1131)

[44 FR 50340, Aug. 28, 1979, as amended at 66 FR 18198, Apr. 6, 2001]

### §3.311 Claims based on exposure to ionizing radiation.

(a) *Determinations of exposure and dose—*(1) *Dose assessment.* In all claims in which it is established that a radiogenic disease first became manifest after service and was not manifest to a compensable degree within any applicable presumptive period as specified in §3.307 or §3.309, and it is contended the disease is a result of exposure to ionizing radiation in service, an assessment will be made as to the size and nature of the radiation dose or doses. When dose estimates provided pursuant to paragraph (a)(2) of this section are reported as a range of doses to